

My Name _____

Address _____

City, State, Zip _____

Phone _____

Email _____

I am the Plaintiff/Petitioner
 Defendant/Respondent
 Attorney for the Plaintiff/Petitioner Defendant/Respondent and my
Utah Bar number is _____

In the Springville Justice Court of Utah

4th Judicial District, Utah County

Court Address: 110 S Main Street, Springville, UT 84663

Plaintiff/Petitioner

v.

Defendant/Respondent

**Request for Verification of
Employment**

Case Number _____

Instructions to the judgment creditor: You must attach the following records and forms.

- Copy of the judgment
- Copy of the Judgment Information Statement
- Response to Request for Verification of Employment Form

- (1) To _____ (Name of presumed employer)
- (2) This Request for Verification of Employment and the attached forms are being sent to you under Utah Code Section 78A-2-216.
- (3) Do you currently employ the judgment debtor?

Certificate of Service

I certify that I served a copy of this Request for Verification of Employment on the following people.

Person's Name	Method of Service	Served at this Address	Served on this Date
(Other Party or Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
(Presumed Employer)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
(Clerk of Court)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Electronic File		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

Date _____ Sign here ► _____

Typed or printed name _____